MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 10827390   FILING DATE 4-20-09

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				IND	DEP	IND	DEP	IND	DEP
	IND	DEP	IND	DEP	IND	DEP								
1	/						51		/						
2		/					52		/						
3		/					53		/						
4		/					54		/						
5		/					55		/						
6		/					56		/						
7		2					57		/						
8							58		/						
9		/					59		/						
10		/					60		/						
11		/					61		/						
12		/					62		/						
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14		/					64		/						
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18		/					68		/						
19		/					69		/						
20		/					70		/						
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31		/					81	/							
32		/					82		/						
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39		/					89		/						
40		/					90		/						
41		/					91		/						
42	/						92		/						
43		/					93		/						
44		/					94		/						
45		/					95		/						
46		/					96		/						
47		/					97		/						
48		/					98		/						
49		/					99		/						
50		/					100								
TOTAL IND.	2						TOTAL IND.	1							
TOTAL DEP.	49						TOTAL DEP.	48							
TOTAL CLAIMS	51						TOTAL CLAIMS	49							